


Scenario/Driving questions	AD use case	Data source/search	PD use case	Data source/search
Scientist is working on immunotherapy as therapy for neurodegeneration. Wants to know what is the best target for AD and PD? Searches for hypotheses as a starting point.	Hypothesis: Amyloid beta (Abeta) is the pathogenic agent causing Alzheimer disease (AD). Reduction of Abeta will treat AD	SWAN hypotheses Alzforum <a href="#">Selkoe</a>	Hypothesis: $\alpha$ -synuclein peptide is the toxic agent that causes Parkinson disease (PD). Reduction of $\alpha$ -synuclein will treat PD	PubMed <a href="#">Kruger et al., 2000</a> <a href="#">Lee &amp; Trojanowski, 2006</a> <a href="#">Recchia et al., 2004</a> <a href="#">Mizuta et al., 2006</a>
Each protein adapts multiple forms in disease. <b>Q: What Abeta and a-syn peptide assemblies have been reported?</b>	RS: Abeta forms monomer, dimer, trimer, ADDL (3 to 12-mer), 12-mer, protofibril, fibril	SWAN	<b>RS:Form filamentous assemblies or aggregations (beta sheets).</b>	PubMed Biocyc <a href="#">Goedert et al. 2001</a>
Each protein exists in multiple cellular locations in disease.	RS: Abeta forms both extracellular deposits and intracellular inclusions	SWAN PubMed <a href="#">Marchesi</a> <a href="#">Selkoe</a>	RS: a-syn forms primarily intracellular inclusions (Lewy bodies), but may also be extracellular	<a href="#">Hashimoto et al., 2003</a>
<b>Q. What form of Abeta is the appropriate target?</b> <b>Q. What form of a-syn is the appropriate target?</b>	RS: A novel form called Abeta*56 causes memory impairment in Tg2576 mouse model of AD	SWAN PubMed <a href="#">Lesne</a>	RS: Lewy body-like fibrils and spherical assemblies are formed most rapidly by A53T, a mutation in the gene encoding alpha-synuclein linked to early-onset Parkinson's disease (PD)	PubMed <a href="#">Conway et al., 1998</a>
<b>Q. What are characteristics of Abeta*56?</b> <b>Q. What are characteristics of pathogenic a-synuclein?</b>	RS: Abeta*56 weighs around 56 kilodaltons and is consistent with it being a 12-mer	SWAN PubMed <a href="#">Lesne</a>	RS: While alpha-synuclein can form several different aggregate morphologies including oligomers, protofibrils and fibrils, the role of these morphologies in the progression of PD is not known.	PubMed <a href="#">Li et al., 2001</a> <a href="#">Spillantini et al., 1998</a>
<b>Q. Have similar forms of Abeta been reported by others?</b>	RS: An ADDL is an Abeta-derived oligomers with dementing activity, with molecular composition of 3-24 monomeric subunits	SWAN PubMed		
<b>Q. Is there data for</b>	RS: <i>The prominent</i>	SWAN	RS: Cytoplasmic aggregates of a-	PubMed BIND?

<b>existence of Abeta*56 in human AD?</b> <b>Q. Is there data for existence of toxic synuclein assemblies in human PD?</b>	<i>immunoreactive species in soluble AD brain extracts thus was identified as an Abeta 12-mer</i>	PubMed <a href="#">Catalano et al., 2006</a> <a href="#">Lambert et al., 2007</a>	synuclein have been visualized in neurons and glial cells as circular or coil-shape.	Biocyc, CCDB? <a href="#">Lashuel et al., 2002</a> <a href="#">Volles &amp; Lansbury, 2002</a> <a href="#">Lee &amp; Lee, 2002</a>
	RS: Properties of ADDL in human AD are consistent with those of Abeta*56	<a href="#">Georganopoulou et al., 2005</a>		
<b>Q. How does Abeta*56 or ADDL impair memory or cause neuronal death?</b> <b>Q. How does a-syn cause dysfunction of death of dopaminergic neurons?</b>	RS: ADDL impairs long-term potentiation (LTP)	SWAN PubMed <a href="#">Lacor et al., 2004</a> <a href="#">Gong et al., 2003</a>	RS: Fibrillization of alpha-synuclein into protofibrils form pore-like assemblies on the surface of brain-derived vesicles. Cytosolic dopamine in dopaminergic neurons promotes the accumulation of toxic alpha-synuclein protofibrils.	Biocyc PubMed <a href="#">Zhang et al., 2005</a> <a href="#">Conway et al., 2001</a> <a href="#">Follmer et al., 2007</a> <a href="#">Mazzulli et al., 2006</a> <a href="#">Rochet et al., 2004</a> <a href="#">Serpell et al., 2000</a>
<b>Q. Is LTP present in parts of the brain affected by AD?</b> <b>Q. Is LTP present in parts of the brain affected by PD?</b>	RS: LTP is exhibited by hippocampal CA1 neurons	Neuron DB	RS. LTP is observed in corticostriatal synapses.   Adobe Acrobat 7.0 Document	<b>Checked out</b> <b><a href="#">NeuronDB</a> for</b> <b><a href="#">Neural</a></b> <b><a href="#">Compartmental</a></b> <b><a href="#">receptors</a> having</b> <b><a href="#">Nigral</a></b> <b><a href="#">dopaminergic</a></b> <b><a href="#">cell</a> as <a href="#">Neuron</a></b> <b>blank needs to</b> <b>be populated</b>
<b>Q. What parts of the brain are affected by AD?</b> <b>Q. What parts of the brain are affected by PD?</b>	RS. Areas affected in early AD include: Hippocampal CA1, entorhinal cortex, basal forebrain cholinergic neurons	SWAN PubMed <a href="#">Apostolova et al., 2006</a>	RS: Areas affected in early PD include: dorsal motor nucleus of the vagus, intermediate reticular zone, caudal raphe nuclei, locus ceruleus.	CCDB PubMed <a href="#">Baloyannis et al., 2006</a> <a href="#">Papapetropoulos, 2006</a> <a href="#">Shults, 2006</a>

<b>Q. What channels or receptors are involved in LTP?</b>	RS: A- and D-type K channels are involved in LTP. "The experimental and modeling results support the hypothesis that dendritic K-A channels and the boosting of back-propagating action potentials contribute to the induction of LTP in CA1 neurons."	NeuronDB BrainPharm <a href="#">Watanabe et al., 2002</a>	RS: D1 and D2 receptors are involved in LTP	NeuronDB BrainPharm
<b>Q. Are A- or D-type K channels expressed in areas affected by AD? What about areas affected in PD?</b>	RS: Hippocampal CA1 neurons express A-type K channels	Neuron DB <a href="#">CA1 pyramidal neuron/channels</a>	RS: Neocortical layer V pyramidal neurons express A-type K channels.	PubMed <a href="#">Bekkers 2000</a>
	RS: The A-type K current is reduced by Abeta	BrainPharm <a href="#">Plant et al., 2006</a>		
<b>Q. Would an antibody directed against ADDL / Abeta*56 restore A-current in the mouse model hippocampal neuron (e.g. in an organotypic slice prep)?</b> <b>Q. Would an antibody directed against synuclein/aggregates restore A-current in the mouse model dopaminergic neuron (e.g. in an organotypic slice prep)?</b>	UNKNOWN: Future experiment?	PubMed BrainPharm	UNKNOWN: Future experiment?	PubMed BrainPharm
<b>Q. What genes are expressed in both hippocampus and striatum; do any affect receptors or channel properties?</b>		The Allen Brain Atlas		CCDB

<b>Hypothesis: Immunization is a strategy to remove the toxic peptide and thereby prevent or treat AD and PD</b>	RS: Immunization with synthetic Abeta peptide cleared plaques in the PDAPP mouse model	SWAN; PubMed <a href="#">Schenk et al., 1999</a> <a href="#">Maier et al., 2006</a> <a href="#">Klyubin et al., 2005</a> <a href="#">Hock et al., 2003</a>	RS: Immunization with recombinant human alpha-synuclein reduced intracellular AS accumulation, preserved synaptic density.	PubMed <a href="#">Masliah et al., 2005</a> <a href="#">Pilcher, 2005</a>
<b>Q. Adverse effects associated with immunotherapy?</b>	RS: The first clinical trial of an AD vaccine was halted because patients developed encephalitis.		Q: Are the safety issues raised in the AD trial of concern for a PD trial?	
<b>Q: Why did some, but not all, patients, develop encephalitis?</b>	RS: Interferon gamma may be involved in triggering encephalitis in some patients following Abeta immunization.	PubMed <a href="#">O'Toole et al., 2005</a> <a href="#">Monsonago et al., 2006</a>		
<b>Q: What genes are involved in Interferon gamma regulation?</b>		Gene Network KEGG		
<b>Q: What genes are activated following IfnG signalling?</b>		Gene Network KEGG		
<b>Q: Could any of the genes involved in IfnG signalling act as a biomarker with predictive value for encephalitis?</b>		PubMed		
<b>Q: Could a common immunotherapy treat both AD and PD?</b>	Hypothesis: Both AD and PD represent pathologies induced by misfolded proteins adapting pathogenic conformations.	PubMed <a href="#">Walsh &amp; Selkoe, 2004</a> <a href="#">Quist et al., 2005</a> <a href="#">Glabe, 2006</a>	Hypothesis: Both AD and PD represent pathologies induced by misfolded proteins adapting pathogenic conformations.	PubMed <a href="#">Walsh &amp; Selkoe, 2004</a> <a href="#">Quist et al., 2005</a> <a href="#">Glabe, 2006</a>
<b>Q. Is there evidence for a common antigen target in both AD and PD?</b>	RS: Atomic force microscopy shows that Abeta forms channel-like structures induced by membranes.	PubMed Alzforum? SWAN?	RS: Atomic force microscopy shows that synuclein forms channel-like structures induced by membranes.	PubMed CCDB? <a href="#">Furukawa et al., 2006</a>
<b>Q: Are channels formed by aberrantly misfolded Abeta distinguishable from normally occurring pores</b>		PubMed <b>BrainPharm</b>		PubMed CCDB? <b>BrainPharm</b>

or channels?				
Q: Can other proteins associated with neurodegenerative disease form pathogenic conformations in a similar manner to Abeta and a-synuclein?		PubMed BrainPharm		PubMed <a href="#">Thompson &amp; Barrow, 2002</a> BrainPharm
Q: Could a common immunotherapy strategy targeting misfolded protein ion channels be useful in both AD and PD? Huntington Disease? Prion disease?		PubMed		PubMed <a href="#">Thompson &amp; Barrow, 2002</a>